Image# 11971820598 PAGE 1 / 18

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTAL FO	or Other Than An At	ithorized Committee	Office Use Only
NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, typover the lines.	e 12FE4M5
FEDERATION OF AME	RICAN HOSPITAL	_S PAC	
<u> </u>			
ADDRESS (number and street)	750 9th Street NW		
▼	Suite 600		
Check if different than previously reported. (ACC)	WASHINGTON		DC 20001 -
2. FEC IDENTIFICATION NUM	MBER ▼ C	SITY 🛦	STATE ▲ ZIP CODE ▲
C C00002261	3.	IS THIS REPORT NEW (N)	OR × AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	Report Due On:	eb 20 (M2) May 20 ar 20 (M3) Jun 20	(M6) Sep 20 (M9) Dec 20 (M12) (Non-Election
_	A	or 20 (M4) Jul 20 ((M7) X Oct 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q1)	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
July 15 Quarterly Report (Q2)	PRF-Election	Convention (12C)	Special (12S)
October 15 Quarterly Report (Q3))		
January 31 Year-End Report (YE)	Elec	tion on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	·	tion on	in the State of
5. Covering Period 09	01 2011		09 / 30 / 2011
I certify that I have examined this	Report and to the best	of my knowledge and belief it	t is true, correct and complete.
Type or Print Name of Treasurer	Mrs. Karen Conwell Smith	1	
Signature of Treasurer Mrs. Ko	aren Conwell Smith	[Electronically Filed]	Date 11 04 2011
NOTE: Submission of false, erroneo	us, or incomplete informat	ion may subject the person sig	ning this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

01 2011 09 30 2011 Report Covering the Period: 09 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 13504.68 January 1, 2011 (b) Cash on Hand at 50398.10 Beginning of Reporting Period..... 309914.66 6232.74 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 56630.84 323419.34 6(a) and 6(c) for Column B)..... 44570.30 311358.80 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 12060.54 12060.54 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:	101.01 1110 1 01100	- Calondar Four to Batto
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	6102.44	255101.18
(ii) Unitemized	, 49.00	6978.68
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	6151.44	262079.86
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	30000.00
(such as PACs)	0.00	30000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	6151.44	292079.86
Totals to Line 33, page 5)	0131.44	232013.00
Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
All Loans Received	0.00	0.00
All Loans Received	7	0.00
	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other	0.00	6000.00
Political Committees	0.00	0000.00
Other Federal Receipts (Dividends, Interest, etc.)	04.20	11834.80
Transfers from Non-Federal and Levin Funds	81.30	11034.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(ITOTT Scriedule 113)	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transiers (add To(a) and To(b))	0.00	0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	6232.74	309914.66
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	6232.74	309914.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Disbursements COLUMN A Total This Period			
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calendar Year-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(II) A	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	0.00	0.00		
Expenditures(c) Total Operating Expenditures	0.00	0.00		
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
Transfers to Affiliated/Other Party				
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	44500.00	299500.00		
Independent Expenditures	0.00	0.00		
(use Schedule E)	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(use scriedule F)	7 7	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	0.00	0.00		
Ī		0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00			
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Disbursements	70.30	11858.80		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(I) Federal State				
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
-				
Total Disbursements (add Lines 21(c), 22,	11570.00			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	44570.30	311358.80		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	44570.30	311358.80		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	6151.44	292079.86
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6151.44	292079.86
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:					PAGE	6	OF	18
(check only one)									
	X	11c	12	2					
		13		14		15	16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN	HOSPITALS PAC	
Full Name (Last, First, Middle Initial) A. Jayne Chambers		Date of Receipt
Mailing Address 1256 Kensington Rd		09 15 <u>2011</u>
City	State Zip Code	Transaction ID: 42217175
McLean	VA 22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	43.00
Name of Employer	Occupation	
FAH	Vice President Legislation & Public Af	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1731.00	
Full Name (Last, First, Middle Initial) 3. Jeffrey E. Cohen		Date of Receipt
Mailing Address 4927 15th Street, North		09 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Arlington	State Zip Code VA 22205-2616	Transaction ID : 42217176
Arlington		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer	Occupation	
FAH	Lobbyist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 714.00	
Full Name (Last, First, Middle Initial) Charles N. Kahn III		Date of Receipt
Mailing Address 4545 N Glebe Road		09 15 2011
City Arlington	State Zip Code VA 22207-4848	Transaction ID : 42217177 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer	Occupation	
FAH	President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	708.39	
SUBTOTAL of Receipts This Page (optional)		126.67
TOTAL This Period (last page this line number	<u></u>	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:					PAGE	7	OF	18
(check only one)									
X 11a 11b						11c	12		
		13	1	14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN	HOSPITALS PAC	
Full Name (Last, First, Middle Initial) Jeffrey G. Micklos Mailing Address 3130 Tennyson St., N.W.		Date of Receipt
		09 15 2011
City	State Zip Code	Transaction ID : 42217178
Washington	DC 20015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer	Occupation	
FAH	General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 905.00	
Full Name (Last, First, Middle Initial) Bonnie Moneypenny Mailing Address 14128 Burlingame Road		Date of Receipt
City	State Zip Code	09 15 2011 Transaction ID : 42217179
Little Rock	AR 72211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	35.00
Name of Employer	Occupation	
FAH	SVP Administrative Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	
Full Name (Last, First, Middle Initial) Mr. Steve Speil		Date of Receipt
Mailing Address 1948 Rockingham Street		09 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McLean	State Zip Code VA 22101-4922	Transaction ID : 42217181 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.55
Name of Employer	Occupation	
FAH	Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1408.25	
SUBTOTAL of Receipts This Page (optional)		174.55
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:					PAGE	8	OF	18	
(check only one)										
X 11a 11b						11c	12			
		13		14		15	16		17	

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FEDERATION OF AMERICA	N HOSPITALS PAC	
Full Name (Last, First, Middle Initial) A. Ronald L. Kaufman MD.		Date of Receipt
Mailing Address 204 Annadale Road		09 30 2011
City	State Zip Code	Transaction ID : 42217204
Pasadena	CA 91105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Tenet Healthcare Corporation	Physician Exectuive	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Dr. David Katzin		Date of Receipt
Mailing Address 3080 Canterbury Drive		09 30 _2011 _
City	State Zip Code	Transaction ID : 42217205
Boca Raton	FL 33434-3348	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Tenet Healthcare Corporation	Regional Chief Medical Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Ayyregate real-to-Date ¥	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. John King		Date of Receipt
Mailing Address 642 S. 2nd Street Apt. 511		09 15 2011
City	State Zip Code	Transaction ID : 42217207
Louisville	KY 40202-2438	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	
Kindred Healthcare Inc	Executive	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (optional)	····	3000.00
TOTAL This Period (last page this line numb	er only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	=	9	OF	18	
(check only one)										
X 11a 11b					11c		12	!		
		13		14		15		16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FEDERATION OF AMERICA	N HOSPITALS PAC	
Full Name (Last, First, Middle Initial) Mr. William Altman Mailing Address 9103 Lexington Lane		Date of Receipt
City Louisville FEC ID number of contributing federal political committee. Name of Employer Kindred Healthcare Inc Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code KY 40241-2423 C Occupation Executive Aggregate Year-to-Date ▼	09 15 2011 Transaction ID: 42217208 Amount of Each Receipt this Period 2000.00
Full Name (Last, First, Middle Initial) Mr. Anthony Disser Mailing Address 704 Rudy Lane City Louisville FEC ID number of contributing federal political committee.	State Zip Code KY 40207	Date of Receipt 09 15 2011 Transaction ID: 42217209 Amount of Each Receipt this Period 500.00
Name of Employer Kindred Healthcare Inc Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Jayne Chambers Mailing Address 1256 Kensington Rd City McLean FEC ID number of contributing federal political committee. Name of Employer FAH	State Zip Code VA 22101 C Occupation Vice President Legislation & Public Af	Date of Receipt 09 30 2011 Transaction ID: 42391792 Amount of Each Receipt this Period 43.00
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 1774.00	2543.00
TOTAL This Period (last page this line numb	per only)	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	 10	OF	18			
	(c	che	ck only	or	ne)					
		X	11a		11b		11c	12		
			13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN	N HOSPITALS PAC	
Full Name (Last, First, Middle Initial) Jeffrey E. Cohen Mailing Address 4927 15th Street, North	Date of Receipt	
		09 30 2011
City Arlington	State Zip Code VA 22205-2616	Transaction ID : 42391793
FEC ID number of contributing federal political committee.	C 22203-2010	Amount of Each Receipt this Period 42.00
Name of Employer FAH Receipt For:	Occupation Lobbyist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	756.00	
Full Name (Last, First, Middle Initial) Charles N. Kahn III Mailing Address 4545 N Glebe Road	Date of Receipt 09 30 2011	
City	State Zip Code	Transaction ID: 42391794
Arlington FEC ID number of contributing federal political committee.	VA 22207-4848	Amount of Each Receipt this Period 41.67
Name of Employer FAH	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.06	
Full Name (Last, First, Middle Initial) 2. Jeffrey G. Micklos	•	Date of Receipt
Mailing Address 3130 Tennyson St., N.W.		09 30 _ 2011 _
City Washington	State Zip Code DC 20015	Transaction ID : 42391795 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer FAH	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	
SUBTOTAL of Receipts This Page (optional).		138.67
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

				PAGE		OF	18					
	(0	che	ck only	or	ne)							
		X	11a		11b		11c		12			
			13		14		15		16	;		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN	HOSPITALS PAC					
Full Name (Last, First, Middle Initial) A. Bonnie Moneypenny Mailing Address, 14128 Burlingame Road						
		09 30 2011				
City Little Rock	State Zip Code AR 72211	Transaction ID: 42391796 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	35.00				
Name of Employer FAH Receipt For:	Occupation SVP Administrative Services					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00					
Full Name (Last, First, Middle Initial) Mr. Steve Speil Mailing Address 1948 Rockingham Street	Date of Receipt					
City McLean	State Zip Code VA 22101-4922	09 30 2011 Transaction ID : 42391798 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	84.55				
Name of Employer FAH	Occupation Chief Financial Officer					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1492.80					
Full Name (Last, First, Middle Initial)		Date of Receipt				
Mailing Address		M = M / D = D / Y = Y = Y				
City	State Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C					
Name of Employer	Occupation					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼					
SUBTOTAL of Receipts This Page (optional)		119.55				
TOTAL This Period (last page this line number	only)	6102.44				

S П

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Use separate schedule(s) (check only one)								
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN	name and a	address of any political committee							
Full Name (Last, First, Middle Initial) A. Federation of American Hospitals - File Mailing Address 801 Pennylvania Ave., NW Suite 245 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State DC C	Zip Code 20004	Date of Receipt 09 30 2011 Transaction ID: 42217206 Amount of Each Receipt this Period 46.30 Bank Fee Reimbursement						
Full Name (Last, First, Middle Initial) B. Federation of American Hospitals - Mailing Address 801 Pennylvania Ave., NW Suite 245 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State DC C	Zip Code 20004	Date of Receipt 09 15 2011 Transaction ID: 42217210 Amount of Each Receipt this Period 35.00 Bank Fee Reimbursement						
Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	00.0	Zip Code Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period						

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

81.30

81.30

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 13 OF 18						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)						
	Detailed Summary Page	21b	22 X 23	24 25 26					
Г		27	28a 28b	28c 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)	me and address of any politice	ar ooninniidee lo	CONOR CONTRIDUCTIONS HOLD	cuon commuce.					
FEDERATION OF AMERICAN HO	OSPITAL S PAC								
LDLIATION OF AWERICAN FI	JOI IIALO FAO								
Full Name (Last, First, Middle Initial)									
A. Bridge PAC			Date of Disbursemen	t					
Marie Additional Control of the Cont			M M / D D	/					
Mailing Address 499 S. Capitol Street SW Suite 412			09 15	_2011					
City	State Zip Code								
Washington	DC 20003		Transaction ID: 42	017347					
Purpose of Disbursement									
		011	Amount of Each Disb	oursement this Period					
Candidate Name		Category/		5000.00					
Office Cought.	mant Fam	Туре		3300.00					
Office Sought: House Disburse Senate	ment For:								
President	Primary General Other (specify) ▼								
State: District:	Caron (opoony) ▼								
Full Name (Last, First, Middle Initial)									
B. Friends Of Dick Durbin Committee	į		Date of Disbursemen	t					
	.	_	M = M / D = D	/ Y Y Y Y Y					
Mailing Address PO Box 1949			09 15	2011					
01.	01-1-								
City Springfield	State Zip Code IL 62705		Transaction ID: 42017385						
Purpose of Disbursement	- 32103								
		011	Amount of Each Disbursement this Pe						
Candidate Name		Category/		5000.00					
Sen. Richard J. Durbin		Туре		5000.00					
	ment For: 2014								
Senate President	Primary General								
State: IL District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
C. Friends Of Dick Durbin Committee	1		Date of Disbursemen	t					
	•		M M / D D	/					
Mailing Address PO Box 1949			09 15	2011					
City	State Zip Code		Transaction ID: 42	017386					
Springfield Purpose of Disbursement	IL 62705								
. 3.5000 0. 2.03010011011		011	Amount of Each Disb	ureament this Pariod					
Candidate Name		Category/	Amount of Lacif DISD	arsoment this Fehou					
Sen. Richard J. Durbin		Type		2500.00					
Office Sought: House Disburse	ment For: 2014			,					
Senate	Primary General								
President	Other (specify) ▼								
State: IL District:									
				12500.00					
SUBTOTAL of Disbursements This Page (optional).		·····•		12300.00					
TOTAL This Period (last page this line number only	· · · · · · · · · · · · · · · · · · ·								
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S	CHEDULE B (FEC Form 3X)	11	anaka cala 1.1.7.	NE NUMBER: PAGE 14 OF 18								
IT	EMIZED DISBURSEMENTS		parate schedule(s) category of the	(check only	nly one)							
			Summary Page	21b	22 28a	23 28b		25 26 30				
_	un information control from such D		mak har selet									
	ly information copied from such Reports and Staten for commercial purposes, other than using the nam											
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,									
$ \rangle$	FEDERATION OF AMERICAN HO	SPITAI	SPAC									
		O: ::/:	201710									
$\overline{}$	Full Name (Last, First, Middle Initial)											
Α.	Snowe For Senate				Date o	f Disburse	ment					
	Mailing Address P.O. Box 2006				M = M	/ D		1 1				
	Mailing Address P.O. Box 2006				09	15	20	11				
	City	State	Zip Code		_							
	Portland	ME	04104		Trans	saction ID	: 42017389					
	Purpose of Disbursement											
				011	Amoun	t of Each	Disbursement	this Period				
	Candidate Name			Category/				2500.00				
	Sen. Olympia J. Snowe Office Sought: House Disbursen	nent For:	2012	Туре			7					
		Primary	General									
	President	Other (spe										
	State: ME District:	\ \ I	3, 4									
	Full Name (Last, First, Middle Initial)											
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	Purpose of Disbursement	ME	04104									
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	Candidate Name				7 11110 4111							
	Sen. Olympia J. Snowe			Category/ Type	500.00							
	Office Sought: House Disbursen	nent For:	2012	,,								
		Primary	X General									
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_	State: ME District:											
_	Full Name (Last, First, Middle Initial)				Data	f Disburse						
C.	Heartland Values PAC					_						
	Mailing Address PO Box 505				09	28		11				
	,	State	Zip Code		Trans	saction ID	: 42207862					
		SD	57101				0.002					
	Purpose of Disbursement			011								
	Candidate Name				Amoun	t of Each	Disbursement	this Period				
				Category/ Type	Ι.			3000.00				
	Office Sought: House Disbursen	nent For:		.,,,,			7					
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	President	Other (spe	ecify) ▼									
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 15 OF 18										
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	Check only	IVOIVIBEIT:									
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	Detailed Summary Page	27	28a 28b 28c 29 30b									
Any information copied from such Reports and State	nents may not be sold or use	ed by any nerso	on for the purpose of soliciting contributions									
or for commercial purposes, other than using the nar												
NAME OF COMMITTEE (In Full)												
FEDERATION OF AMERICAN HO	SPITALS PAC											
/ TEBERATION OF AMERICANINE	OTTIMEOTAG											
Full Name (Last, First, Middle Initial)												
A. New Pioneers PAC			Date of Disbursement									
			09 28 2011									
Mailing Address 228 S Washington Street												
Ste 115	O											
	State Zip Code		Transaction ID: 42207878									
Alexandria Purpose of Disbursement	VA 22314											
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Candidate Name			Amount of Each Dispulsement this Fellou									
Cardidate Name		Category/	2500.00									
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President	Other (specify)											
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Full Name (Last, First, Middle Initial)												
B. Rely On Your Beliefs (ROYB) Fund	4		Date of Disbursement									
- Rely Off Tour Beliefs (ROTB) Turk	u		M = M / D = D / Y = Y = Y									
Mailing Address 209 Pennsylvania Avenue SE			09 28 2011									
Maining / Mainese 2001 Chinayiyania Avenue OL			00 10 10 1									
City	State Zip Code		Transaction ID: 42207884									
Washington	DC 20003											
Purpose of Disbursement												
		011	Amount of Each Disbursement this Period									
Candidate Name	_	Category/	5000.00									
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	ment For:											
Senate	Primary General											
President	Other (specify) ▼											
State: District:												
Full Name (Last, First, Middle Initial)	1.0		Date of Disbursement									
C. National Republican Congressiona	ii Committee											
Mailing Address, 220 First Street, S.F.			09 28 2011									
Mailing Address 320 First Street, S.E.			20 2011									
City	State Zip Code											
Washington	DC 20003		Transaction ID: 42207886									
Purpose of Disbursement												
		011	Amount of Each Disbursement this Period									
Candidate Name		Category/										
National Republican Congressiona	al Committee	Type	5000.00									
Office Sought: House Disburser	ment For:		, , , , , , , , , , , , , , , , , , , ,									
Senate	Primary General											
President	Other (specify) ▼											
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SUBTOTAL of Disbursements This Page (optional)			12500.00									
TOTAL This Period (last page this line number only)											

SCHEDULE B (FEC Form 3X)	Her -	An and and 177	FOR LINE I	PAGE	PAGE 16 OF 18						
ITEMIZED DISBURSEMENTS		te schedule(s) tegory of the	(check only				7.65				
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NAME OF COMMITTEE (In Full)											
angle FEDERATION OF AMERICAN HC	SPITALS	PAC									
Full Name (Last, First, Middle Initial)											
National Republican Senatorial Co	mmittee			Date of	Disbursem	nent					
Mailing Address The Bonald Beassa Beauthlisse C	onto			M M	/ D D		Y Y Y	Y			
Mailing Address The Ronald Reagan Republican C 425 Second Street NE	ente			09 28 2011							
City	State Z	Zip Code		T	action ID -	42207007					
Washington	DC 2	20002		irans	action ID :	42207887					
Purpose of Disbursement			011	A	of Fact D	lioburos :	v+ +b:- □	orio-l			
Candidate Name			011	Amount	of Each D	isbursemer	it this Po	eriod			
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Office Sought: House Disburser	ment For:		.,,,,		7	7					
Senate	Primary	General									
President	Other (specify	/) ▼									
State: District:											
Full Name (Last, First, Middle Initial)				Dot- :	Diohuraa	ont					
3. Steve Cohen For Congress					Disbursem						
Mailing Address 349 Kenilworth Place				09	28		2011	Y			
				- 00	20			_			
,		Zip Code		Trans	action ID :	42207890					
Memphis Purpose of Disbursement	TN :	38112			· •						
ruipose of Disbuisement			011	Amount	of Each D	isbursemer	nt this Po	eriod			
Candidate Name			Category/	2 2			-	_			
Rep. Stephen Cohen			Type		,	,	1000.	00			
Office Sought: House Disburser	ment For: 20	12									
	Primary	General									
State: TN District: 09	Other (specify	() ▼									
State: TN District: 09 Full Name (Last, First, Middle Initial)											
Larson For Congress				Date of	Disbursem	nent					
				M M	/ D D		Y	Y			
Mailing Address 29 Ruff Circle				09	28		2011				
Cit.	04-4-	7im Ocala									
City Glastonbury		Zip Code 06033		Trans	action ID :	42207894					
Purpose of Disbursement	<u> </u>										
			011	Amount	of Each D	isbursemer	nt this Po	eriod			
Candidate Name			Category/				2500	20			
Rep. John B. Larson			Type			-	2500.0	JU			
	ment For: 201										
Senate President	Primary Other (specify	General									
State: CT District: 01	Outor (Specify	() ▼									
3. 2.2				_			-	_			
SUBTOTAL of Disbursements This Page (optional)							8500.0	00			
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TOTAL This Period (last page this line number only))			1 .		1 (0)	1 (5)				

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 17 OF 18								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only] 24						
	Detailed Summary Page	27	28a 28b	28c 29 30						
Any information copied from such Reports and Statem										
or for commercial purposes, other than using the name	e and address of any politica	I committee to	solicit contributions fro	m such committee.						
NAME OF COMMITTEE (In Full)										
FEDERATION OF AMERICAN HO	SPITALS PAC									
Full Name (Last, First, Middle Initial)										
^{A.} Friends Of John Barrasso			Date of Disburseme	nt						
Mailing Address PO Box 52008			09 30	2011						
City	State Zip Code		Towns the ID 4	2045005						
Casper	WY 82605		Transaction ID: 4	2215925						
Purpose of Disbursement		011	Amount of Each Dis	bursement this Period						
Candidate Name			Autour of East Blo							
Mr. John Barrasso		Category/ Type		5000.00						
Office Sought: House Disbursen	nent For: 2012		,	,						
∑ Senate	Primary General									
	Other (specify) ▼									
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Office Sought: House Disbursem										
	Primary General Other (specify) ▼									
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			Amount of Each Dis	bursement this Period						
Candidate Name		Category/								
Office Sought: House Disbursen	aont For:	Туре								
	Primary General									
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State: District:	(1)									
SUBTOTAL of Disbursements This Page (optional)		·····•		5000.00						
				44500.00						
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	EMIZED DISBURSEMENTS	Use separate schedule(s)	\ I	FOR LINE NUMBER: PAGE check only one)											
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	NAME OF COMMITTEE (In Full) FEDERATION OF AMERICAN HO	CDITAL C DAC													
	FEDERATION OF AMERICAN HO	SPITALS PAC													
	Full Name (Last, First, Middle Initial)														
A.	Wachovia Bank					Date of Disbursement									
			M M / D D / Y Y Y Y												
	Mailing Address 801 Pennsylvania Ave, NW		09 01 2011												
	City	State Zip Code													
	Washington	DC 20004					Trans	acti	ion ID	: 4	12002	025			
	Purpose of Disbursement				\neg										
	Bank Fees			001			Amoun	t of	Each	Dis	sburs	emen	t this	Peri	od
	Candidate Name			tego			Г.						4	6.30	
	Office Sought: House Disbursen	nent For:		Гуре			_	÷	7		7				
		Primary General					Bank Fe	200							
	President	Other (specify) ▼					Bariik i k	500							
	State: District:														
_	Full Name (Last, First, Middle Initial)														
В.	Wachovia Bank					Date of Disbursement 09 12 2011									
	Mailing Address 801 Pennsylvania Ave, NW														
	Walling Address 801 Fellisylvania Ave, NVV						0.5			_			.011		
	,	State Zip Code		Transaction ID : 42391319											
	. raeg.e	DC 20004			mana	sacı	ion ib	,	+2331	313					
	Purpose of Disbursement Bank Fees			Amount of Each Disbursement this Period							od				
	Candidate Name			Amount of Each Disbursement this Period								ou -			
			ry/	24.00											
	Office Sought: House Disbursen	nent For:		-											
		Primary General					Bank F	ees							
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C.	Full Name (Last, First, Middle Initial)						Date of	f Dis	sburse	eme	ent				
٠.							M M		D		 1 / F	V V	/ I Y	V	
	Mailing Address								L.						
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			Π.				Amoun	t of	Each	Dis	sburs	emen	t this	Peri	od
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			1	Гуре					7		- 7				
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